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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/830,949			ing Date 06/2001	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR N			UMBER FIL	.ED NUI	MBER EXTRA	Г	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A		N/A		N/A			N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 = *			1	x \$ =		1	x \$ =	
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addi	er, the applicatio for small entity) sheets or fraction	on and drawings exceed 100 , the application size fee due or small entity) for each eets or fraction thereof. See (1)(G) and 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If	he difference in coli	ımn 1 is less than	r "0" in column 2.		TOTAL			TOTAL			
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY CR SMALL ENTITY CLAMIS HIGHEST CLAMIS CLAMIS											
AMENDMENT	09/30/2009	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 52	Minus	·· 91	= 0	1	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1,16(h))	· 3	Minus	···24	= 0	1	x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())	*	Minus	**	-]	x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(h))		Minus	***	=	l	x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))					l	<u> </u>			Ь—	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
Ti A									OR	TOTAL ADD'L FEE	
* If the orbity in column 1 is less than the entry in column 2, write "o" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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